

HRAB LOCAL RECORDS PRESERVATION GRANT APPLICATION

ADAH Use Only	
Application #:	
Award #:	

Submission Deadline: January 31, 2009

Agency/Entity Applying:		
Federal Employee Identification (FEIN) Number:	
Project Director: Name/Title:		E-Mail Address:
Address:		Telephone No.:
City/State/Zip:		Fax No.:
Description of Grant Project: Title of Project:		
Starting Date:	E	nding Date:
Funding Required for Project: Grant Funds:	Local Funds:	Total Cost:
CEI	RTIFICATION OF AUT	THORIZATION
v	duly authorized by the a	this form and in the narrative is accurate and pplicant's governing body, and the applicant ds are awarded.
Signature of Authorizing Individu	nal:	
Name/Title of Authorizing Individ	lual:	Date:
Send the completed form (inclu	,	
	Government Records	
Alab	ama Department of Arc P.O. Box 3001	· · · · · · · · · · · · · · · · · · ·

Or submit form by fax to (334)353-4321, or by e-mail (as a PDF attachment) to: records@archives.alabama.gov. Questions? Contact Tom Turley or Tracy Berezansky at (334)242-4452.

Montgomery, AL 36130-0100

BUDGET FORM

Salaries and Wages: List names/titles of all project staff, volunteers, and consultants; their payment during the project; and the source of the payment (grant or local funding).

Name/Title	Grant Funds	Local Funds	Total
Subtotals:			

Equipment, Supplies, Materials: List equipment, supplies, and materials to be purchased for the project. Include specifications and vendor price quotations with application.

Item	Grant Funds	Local Funds	Total
Subtotals:			

Services: List costs of any vendor-provided services or activities not shown under other budget categories.

Item	Grant Funds	Local Funds	Total
Subtotals:			

Travel: If travel is part of the project, list anticipated number of trips, number of people participating, and estimated cost. Include per diem, room and board, and travel reimbursement rates, as applicable.

Item	Grant Funds	Local Funds	Total
Subtotals:			

SUMMARY BUDGET:

Add subtotal lines to obtain summary budget figures. (All projects require a 50% cost-share of the total project budget from the grant recipient. Cost-sharing can be either cash or in-kind contributions.)

	Grant Funds	Local Funds	Total
Salaries and Wages			
Equipment, Supplies, Materials			
Services			
Travel			
TOTAL GRANT COST:			

Financial Administrator of Grant:

This person is responsible for actual financial administration of the grant, for ensuring compliance with its terms and conditions, and for preparing financial documentation and reports.

Name/Title:	E-Mail Address:
Address:	Telephone No.:
City/State/Zip:	Fax No:

GRANT APPLICATION NARRATIVE

Review the instructions in the application guidelines before completing this section. The narrative should be no longer than five (5) double-spaced, typewritten pages ($8\frac{1}{2} \times 11$ " paper) and should be attached to this application form.

If you have any questions about the application process or need assistance during your grant project, please contact Tom Turley, Local Government Records Archivist, or Tracey Berezansky, HRAB Deputy Coordinator, at:

Government Records Division
Alabama Department of Archives and History
P.O. Box 300100
Montgomery, AL 36130-0100

Telephone:(334)353-4607 (Tom) or (334)353-4604 (Tracey)

Fax: (334)353-4321

E-mail: Tom.Turley@archives.alabama.gov

Tracey.Berezansky@archives.alabama.gov

HRAB website: http://archives.alabama.gov/hrb/hrbmainpage.htm

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